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Patricia A. Verlangieri

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Serial No.: 09/626,900  
Docket No.: PD990040  
Examiner: Kim Kwok Chu  
RCE Transmittal Form (2 Copies - 2 Pages)  
Fee Transmittal Form (2 Copies - 2 Pages)  
Petition for Extension of Time (2 Copies - 2 Pages)  
Amendment (6 Pages)

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<b>FEE TRANSMITTAL</b> <b>for FY 2004</b> Effective 10/01/2003. Patent fees are subject to annual revision.		Complete if Known	
		Application Number	09/626,900
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	July 27, 2000
		First Named Inventor	Christian Buchler et al.
		Examiner Name	Kim Kwok Chu
TOTAL AMOUNT OF PAYMENT (\$)		1240	Attorney Docket No. PD990040 <b>MAR 27 2006</b>

<b>METHOD OF PAYMENT (check all that apply)</b> <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 07-0832 Deposit Account Name: THOMSON LICENSING INC., Customer No. 24498 The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		<b>FEE CALCULATION (continued)</b> <b>3. ADDITIONAL FEES</b>																																																																																																																																																																																																																																											
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SUBMITTED BY		Complete if applicable			
Name (Print/Type)	Patricia A. Verlangieri	Registration No. (Attorney/Agent)	42,201	Telephone	(609) 734-6667
Signature	<i>Patricia A. Verlangieri</i>	Date	March 27, 2006		

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